

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10-784-223 FILING DATE 02-24-04
 APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5		4		4		
6		4		4		
7		4		4		
8		4		4		
9		4		—		
10		4		—		
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49						
50						
TOTAL IND.	1		1			
TOTAL DEP.	31		23			
TOTAL CLAIMS	32		25			

	IND		DEP		TOTAL	
	IND	DEP	IND	DEP	IND	DEP
51						
52						
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